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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/824,383	04/15/2004	Hiromi Matsusaka	P25217	6631	
	7590 08/20/200 & BERNSTEIN, P.L.		EXAMINER		
	CLARKE PLACE		LU, ZHIYU		
KESTON, VA	20191		ART UNIT	PAPER NUMBER	
			2618		
			NOTIFICATION DATE	DELIVERY MODE	
			08/20/2008	ELECTRONIC	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Intorvious Summary	10/824,383 MATSUSAKA, HIROMI		IROMI
Interview Summary	Examiner	Art Unit	
	ZHIYU LU	2618	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>ZHIYU LU</u> .	(3)		
(2) <u>Azza Jayaprakash</u> .	(4)		
Date of Interview: 29 July 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)⊠ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>2-4 and 10</u> .			
Identification of prior art discussed: <u>N/A</u> .			
Agreement with respect to the claims f) was reached. g)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Amended claims are disc</u>			was
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW OF THE INTERVIEW OF THE SUBSTANCE	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
Formation Notes November 11 11 11 11 11 11 11 11 11 11 11 11 11	Formula de la companya de la company		
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Application No.

Applicant(s)